TO: ALL SHIPOWNERS, OPERATORS, MASTERS AND OFFICERS OF MERCHANT SHIPS, AND RECOGNIZED ORGANIZATIONS


Reference: (a) Maritime Regulation 7.42.5
(b) World Health Organization (WHO) International Medical Guide

PURPOSE:

The purpose of this Marine Guideline is to provide guidance for vessel owners, operators and managers of the Marshall Islands as to the National requirements for Ship's Medicine Chests. This Guideline supersedes previously numbered Marine Notice 7-041-5, Rev. 12105.

APPLICABILITY:

This instruction should be followed by all Marshall Islands vessels engaged in commerce and on international voyages.

GUIDELINES:

1.0 General

Every Marshall Islands vessel is required to have on board a Ship's Medicine Chest to ensure the health and safety of the vessel's crew. The World Health Organization (WHO), which is a specialized agency of the United Nations, has set standards for medicines and medical supplies that should be maintained on board vessels. The Marshall Islands has accepted these basic standards, and this Guideline is intended for use by vessels that have not yet adopted a standard.

2.0 Equivalencies

The Marshall Islands is aware that other administrations have established standards that are equal to, exceed, and/or are more up-to-date than the WHO standards. For example, European Union Member States use Council Directive 92/29/EEC of 31 March 1992 as a basis for establishing minimum medical supplies and equipment required to be carried on Member State ships. Provided these inventories are effectively equal to, or exceed, WHO standards, they shall be considered in compliance with Administration requirements.

Inquiries concerning the subject of this Guideline should be directed to the Office or the Maritime Administrator, Republic of the Marshall islands, c/o Marshall islands Maritime and Corporate Administrators, Inc., 11495 Commerce Park Drive, Reston, VA 20191-1507 USA.
3.0 Assumptions

In determining these guidelines, several assumptions have been made:

3.1 The officers on board whom are designated, as "medical care providers" will have sufficient training per STCW standards to ensure proper utilization of all medicines or medical supplies on board.

Sufficient reference material or product use and identification cards related to the medicines carried will be available on board the vessel.

3.3 Medical instructions and, if necessary, the medicine labeling are in a language understood by the crew.

3.4 The Ship's Captain's Medical Guide, or equivalent, is being referred to, and/or appropriate radio medical consultation is being received for help with diagnosis and treatment.

4.0 Vessel Requirements

4.1 The requirements of the Ship's Medicine Chest vary depending on the vessel's route and number of persons on board.

4.1 The minimum carriage requirements for medicines and medical equipment to be carried by ships set forth by the WHO standards are detailed in Annex 1. When observing an equivalency to the WHO standards, the corresponding equivalency carriage requirement shall be used. In any case, the minimum carriage requirements for medicines and medical equipment shall be consistent with the guidelines in use.

Mobile and immobile floating production, storage and offloading units (FPS0s) and floating storage units (FS1.Is): Owners and operators may, on advice of a qualified medical practitioner or pharmacist, establish the requisite Medicine Chest based upon the nature of vessel employment, number of crew, distance offshore, availability of immediate MEDEVAC, industry standards, etc. This applies to both WHO standards and equivalency guidelines.

5.0 Other Requirements

5.1 All medicines should be kept by the Master, or other responsible officer, to ensure that the medications are properly dispensed and that records are kept of their disposition.

5.2 It must be remembered that WHO standards and equivalency guidelines are minimum carriage requirements. For this reason, the Ship's Medicine Chest must be inventoried frequently and re-supplied as necessary. In any event, the medicine chest should be inventoried no less than once a year.
5.3 Medicines with expiration dates shall be replaced at the earliest possible date after the expiration date, and in any case within three (3) months of the expiration date. Once replaced, expired medicines should be removed from the vessel and disposed of properly.

6.0 **Controlled Drugs**

6.1 Controlled drugs are drugs that are graded according to the harmfulness attributed to the drug when it is misused. For this purpose, there are three drug categories:

- **Class A** includes heroin, morphine, and opium
- **Class B** includes barbiturates and codeine
- **Class C** includes, among other drugs, anabolic steroids

6.2 A ship must not carry excess quantities of Class A or Class C drugs unless authorized by the Administration. Morphine Sulphate is the only Class A drug authorized to be carried aboard Marshall Islands flagged ships.

6.3 It is illegal to destroy Class A and Class B drugs. They can be disposed of by giving them to a person who may lawfully supply them, such as a qualified doctor or pharmacist. An appropriate receipt shall be obtained and an entry made in the medical log regarding their disposition.

6.4 Some countries do not allow the sale of controlled drugs to ships not registered in that country; therefore, shipmanagers are encouraged to become familiar with the controlled drug distribution laws in the countries where their ships are trading and to communicate directly with the cognizant authorities to learn of the options available for the procurement and delivery of controlled drugs to ships operating in these areas.

7.0 **Carriage of Defibrillators**

7.1 There is no statutory requirement under international or national legislation for ships to carry defibrillators. It is accordingly a matter for individual operators to decide whether or not to include a defibrillator with the medical stores or doctor's bag.

7.2 If a defibrillator is carried, the Administration recommends that systems be in place to ensure regular maintenance of the equipment (in accordance with manufacturer's instructions), and adequate training for the first aid providers, including regular refresher training (at least every six months). Training should also particularly cover care of the patient after defibrillation, bearing in mind that immediate hospitalization may not be possible.

8.0 **Medicines for Ship's Carrying Dangerous Cargoes**

8.1 Ships, including ferries, carrying dangerous cargoes or their residues, should comply with the international Maritime Dangerous Goods (IMDG) Code and the guidance in the IMO/WHO/ILO Medical First Aid Guide for use in accidents involving Dangerous Goods (MFAG) 1994 and any subsequent amendments.